

REVOCATION OF POWER OF ATTORNEY AND NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/707,948
	Filing Date	January 27, 2004
	First Named Inventor	Roy W. Feague
	Art Unit	2836
	Examiner Name	Stephen W. Jackson
	Attorney Docket Number	24540-13108

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application, and I hereby appoint:

☒ Practitioners at Customer Number **00758** OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address to, and associate the above-identified application with:

☒ Practitioners at Customer Number **00758**

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

- ☐ Applicant/Inventor.
- ☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95).

SIGNATURE of Applicant or Assignee of Record

Name	Roy W. Feague
Title	CEO
Signature	<i>Roy Feague</i>
Date	June 15, 2007

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

1.1 Total of _____ forms are submitted.